

Section 4



Facts about Drugs and Prevention Terms

Participants review information about specific drugs and their use.



*approximate time:
2 hours, 30 minutes*

Learning Objectives

Participants will be able to:

- accurately convey basic information about drugs and drug use
- distinguish between supply reduction and demand reduction strategies

Materials and Preparation

Be ready to use the following information and work sheets:

- **The Sharing Hunt**
- **Questions about Drugs**
- **Drugs of Abuse**
- **Gateway Drugs**

You will receive a copy of the *Prevention Primer*.



The Sharing Hunt

Determine a way for the entire group to know the answers to all the questions and then facilitate that process.

1. What would an environmental approach to prevention suggest as the most effective way to reduce alcohol, tobacco and drug problems?

2. A blood alcohol concentration of 0.10 means that a person has _____ part(s) alcohol per _____ parts blood in the body.
3. What is a community partnership?

4. In an employee assistance program, what is the consortia model?

5. What are three examples of negative media messages exemplified by the environmental approach to prevention?



6. What is RADAR Network, and what is its relationship to NCADI?

7. What is media advocacy?

8. What are the four elements of social bonding that prevent alcohol, tobacco and other drug use by youth?

9. What is social marketing?

10. What are the five elements common to student assistance programs?

WORK SHEET



Questions about Drugs

Determine a way for your small group to know the answers to all the questions and then facilitate that process.

1. What are three possible effects of withdrawal to marijuana?

2. What are “goofballs”? Give the name of the drug, the type of drug and the classification of the drug?

3. Atrophy of the testicles is a possible chronic effect of using what type of drug?

4. Esophagitis, pancreatitis and weakened heart muscles are possible chronic effects of using which drug?

5. Under what drug classification is nicotine categorized?

6. What are three major effects of using morphine?

7. What type of drug is found in Dexatrim?

8. “Serenity,” “tranquility” and “peace” are nicknames for which drug?



9. Acute intoxication and psychosis are possible symptoms of overdose of which drug?

10. Name five common sources of inhalant sprays.

11. What is “bhang”?

12. What is Vicodin?

13. Heart attacks, strokes, seizures and respiratory depression are typical acute effects of what type of drug?

14. What is the name of the phenomenon when a person might overdose by taking more than one central nervous system depressant, (e.g. alcohol and Phenobarbital)?

15. At about what age did the average teenager who smokes a pack of cigarettes a day begin smoking?

WORK SHEET

INFORMATION SHEET

Drugs of Abuse



In the following chart, be aware that the major effects, symptoms of overdose, possible effects of withdrawal, and acute and chronic effects are only potential characteristics of the noted drugs; moreover, the characteristics may not in fact apply to all drugs within the corresponding drug category.

DRUG	MAJOR EFFECTS	SYMPTOMS OF OVERDOSE	POSSIBLE EFFECTS OF WITHDRAWAL	ACUTE AND CHRONIC EFFECTS
Central Nervous System Depressants: <ul style="list-style-type: none"> • alcohol (in beer, wine, liquor) • barbiturates (Seconal [“reds,” “red devils”], Nembutal [“yellows,” “yellow jackets”], Tuinal [“rainbows”], Amytal [“blues,” “blue heaven”], Phenobarbital) • nonbarbiturate sedative-hypnotics (Doriden [“goofballs”], Quaalude [“ludes”], Miltown, Equinil) • benzodiazepines (Valium, Librium, Dalmane, Halcion, Xanax, Ativan) • over-the-counter medications (Nytol, Sominex) 	<ul style="list-style-type: none"> • muscle relaxation • disinhibition • reduction in anxiety • impairment of judgment • impairment of motor coordination • decrease in reflexes • decrease in pulse rate • decrease in blood pressure • slurred speech • staggering • sleep 	alcohol: <ul style="list-style-type: none"> • staggering • slurred speech • extreme disinhibition • blackouts • vomiting • possible coma and death <p>Depressants have a synergistic, or potentiation, effect.</p>	<ul style="list-style-type: none"> • anxiety • irritability • loss of appetite • tremors • insomnia • seizures • fever • rapid heartbeat • hallucinations • death 	alcohol: <ul style="list-style-type: none"> • memory loss • gastritis • esophagitis • ulcers • pancreatitis • cirrhosis of the liver • high blood pressure • weakened heart muscles • damage to fetus other depressants: <ul style="list-style-type: none"> • family, social, occupational, financial problems • accidents • violence



INFO SHEET

DRUG	MAJOR EFFECTS	SYMPTOMS OF OVERDOSE	POSSIBLE EFFECTS OF WITHDRAWAL	ACUTE AND CHRONIC EFFECTS
Central Nervous System Stimulants: <ul style="list-style-type: none"> cocaine (“coke,” “blow,” “toot,” “snow”) smokeable forms of cocaine (“crack,” “rock,” “base”) amphetamines (Benzedrine [“crosstops,” “black beauties”], Methedrine [“crank,” “meth,” “crystal”], Dexedrine) nonamphetamine stimulants (Ritalin, Cylert, Preludin) caffeine (in coffees, teas, colas, chocolate, No Doz, Alert, Vivarin) phenylpropanolamine (in Dexatrim) nicotine (in tobacco) 	<ul style="list-style-type: none"> psychomotor stimulation alertness elevation of mood increase in heart rate increase in blood pressure suppression of appetite 	<ul style="list-style-type: none"> tremors sweating and flushing rapid heartbeat anxiety insomnia paranoia convulsions heart attack stroke 	<p>caffeine:</p> <ul style="list-style-type: none"> chronic headache irritability restlessness anxiety <p>cocaine and amphetamines:</p> <ul style="list-style-type: none"> intense drug craving irritability depression anxiety lethargy suicidal ideation and attempts 	<p>acute:</p> <ul style="list-style-type: none"> heart attacks strokes seizures respiratory depression <p>chronic:</p> <ul style="list-style-type: none"> strokes cardiovascular problems depression suicide paranoid schizophrenia perforation of the nasal septum malnourishment



INFO SHEET

DRUG	MAJOR EFFECTS	SYMPTOMS OF OVERDOSE	POSSIBLE EFFECTS OF WITHDRAWAL	ACUTE AND CHRONIC EFFECTS
Opioids: <ul style="list-style-type: none"> • opium • codeine • morphine • heroin (“smack,” “horse”) • Vicodin • Dilaudid • Percodan • methadone • Darvon • Demerol • Talwin • LAAM 	<ul style="list-style-type: none"> • suppression of pain • constipation • euphoria • sedation • constricted pupils 	<ul style="list-style-type: none"> • slow breathing rate • decreased blood pressure • decreased pulse rate • decreased temperature • decreased reflexes • drowsiness • loss of consciousness • flushing and itching • abdominal pain • nausea • vomiting • death 	<ul style="list-style-type: none"> • runny eyes and nose • restlessness • goose bumps • sweating • muscle cramps or aching • nausea • vomiting • diarrhea • drug craving 	<ul style="list-style-type: none"> • death from overdose from injecting opioids • criminal activity • prostitution • malnutrition
Hallucinogens: <ul style="list-style-type: none"> • LSD (“acid,” “fry”) • psilocybin (“magic mushrooms,” “shrooms”) • morning glory seeds (“heavenly blue”) • mescaline (“mesc,” “big chief,” “peyote”) • STP (“serenity,” “tranquility,” “peace”) • MDA (“ecstasy”) • PCP (“angel dust,” “hog”) 	<ul style="list-style-type: none"> • altered state of consciousness • increased suggestibility • delusions • depersonalization • dissociation • increase in pulse • increase in blood pressure 	PCP: <ul style="list-style-type: none"> • acute intoxication and psychosis, including agitation, confusion, excitement, blank state, violent behavior • coma • analgesia other hallucinogens: <ul style="list-style-type: none"> • paranoid ideation • depression • undesirable hallucinations • confusion 	<ul style="list-style-type: none"> • drug craving 	LSD: <ul style="list-style-type: none"> • flashbacks • increase in heart rate • increase in blood pressure • higher body temperature • dizziness • dilated pupils • sensory distortions • dreaminess • depersonalization • altered mood • impaired concentration • acute anxiety • paranoia • fear of loss of control • delusions



INFO SHEET

DRUG	MAJOR EFFECTS	SYMPTOMS OF OVERDOSE	POSSIBLE EFFECTS OF WITHDRAWAL	ACUTE AND CHRONIC EFFECTS
Cannabinols: <ul style="list-style-type: none"> • marijuana (“grass,” “pot,” “weed,” “joint,” “reefer”) • hashish • charas • bhang • ganja • sinsemilla 	<ul style="list-style-type: none"> • euphoria • enhancement of taste, touch, and smell • relaxation • increased appetite • altered time sense • impaired immediate recall • increase in pulse rate • increase in blood pressure • bloodshot eyes • dry mouth • impairment of motor skills • slowness of reaction time 	<ul style="list-style-type: none"> • unusual to overdose 	<ul style="list-style-type: none"> • irritability • restlessness • decreased appetite • insomnia • tremor • chills • increased body temperature 	<ul style="list-style-type: none"> • impairment of ability to drive vehicles <p>chronic use:</p> <ul style="list-style-type: none"> • suppression of immune system • decrease of hormones



INFO SHEET

DRUG	MAJOR EFFECTS	SYMPTOMS OF OVERDOSE	POSSIBLE EFFECTS OF WITHDRAWAL	ACUTE AND CHRONIC EFFECTS
Inhalants and Volatile Hydrocarbons: <ul style="list-style-type: none"> aerosol sprays, gasoline, kerosene, chloroform, airplane glue, lacquer thinner, acetone, nail polish remover, model cement, lighter fluid, carbon tetrachloride, fluoride-based sprays, metallic paints, type-writer correction fluids volatile nitrites (amyl nitrite ["poppers"], butyl, isobutyl ["locker room," "rush," "blot," "quick silver," "zoom"]) nitrous oxide ("laughing gas") 	<ul style="list-style-type: none"> disinhibition euphoria dizziness slurred speech unsteady gait drowsiness constant involuntary movements of the eyes giddiness headaches 	<ul style="list-style-type: none"> hallucinations muscle spasms headaches dizziness loss of balance irregular heartbeat coma 		from method of administration: <ul style="list-style-type: none"> loss of consciousness coma death from lack of oxygen

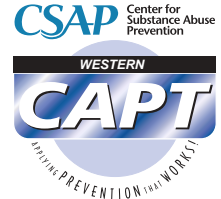


INFO SHEET

DRUG	MAJOR EFFECTS	SYMPTOMS OF OVERDOSE	POSSIBLE EFFECTS OF WITHDRAWAL	ACUTE AND CHRONIC EFFECTS
Anabolic Steroids: <ul style="list-style-type: none"> • Depo-Testosterone • Durabolin • Danocrine • Halotestin • veterinary anabolic steroids (Fininject 30, Equipoise, Winstrol, Delatestryl, Testex, Maxibolan) 	<ul style="list-style-type: none"> • increase of muscle strength • reduction of body mass • increased aggressiveness, competitiveness, and combativeness 		<ul style="list-style-type: none"> • depression • fatigue • restlessness • insomnia • loss of appetite • decreased interest in sex 	<ul style="list-style-type: none"> • increased risk of coronary artery disease • mood swings • periods of unreasonable and uncontrolled anger and violence <p>males:</p> <ul style="list-style-type: none"> • atrophy of testicles • impaired production of sperm • infertility • early baldness • acne • enlargement of breasts <p>females:</p> <ul style="list-style-type: none"> • increase in facial and body hair • lowered voice • irregularity or cessation of menses

(Fisher and Harrison, 1999)

INFORMATION SHEET



Gateway Drugs

Look to the science. The science tell us that preventing or delaying tobacco and alcohol use prevents or delays the use of other drugs as well.

The statistical association is strong between adolescents' use of tobacco, alcohol and other drugs.

Some evidence of progression:

- For boys, alcohol is the precursor to marijuana and other illegal drugs.
- For girls, tobacco smoking along with alcohol is the precursor.

Smoking creates a serious risk. The Monitoring the Future survey found in 1994:

- Eighth-graders who smoked at all were 3 times more likely to try illicit drugs than nonsmokers.
- Pack-a-day smokers were 9 times more likely.
- Tenth-graders were 3 and 7.4 times.
- Twelfth-graders 2.4 and 5 times.

Smoking creates a serious habit. Smoking leads users from initial to regular use more quickly than do other means of administration. This is the case for tobacco, for marijuana and for methamphetamine. It's a gateway for some, a trap door for others. In summary, the use of marijuana and other drugs is exceedingly rare among those who have not used alcohol or tobacco first.

QUESTION:

"How do you justify the expansion of the Office of National Drug Control Policy (ONDCP) mandate to include alcohol and tobacco use? Isn't this likely to erode ONDCP's focus on dangerous, illegal drugs?"

ANSWER:

Aggressive efforts to prevent underage use of tobacco and alcohol are essential to the prevention of illicit drug use. In fact, there is a practical convergence of drug prevention and crime prevention research that calls for aggressive prevention of gateway drugs and aggressive policing of minor offenses, as a means to foster social order and check progression to more dangerous behavior.

There is long-standing, bipartisan support for this approach. Since 1992, the National Drug Control Strategy has included underage use of alcohol and tobacco as an appropriate focus of drug prevention and treatment efforts.

The 1992 National Drug Control Strategy, issued by President Bush, sharpened the focus of the nation's strategy on the treatment and prevention of alcohol abuse, noted that drug prevention programs are



more likely to succeed if they also address underage drinking and stated that underage tobacco use is a gateway to other more harmful drugs.

The Clinton Administration has carried forward efforts against underage tobacco and alcohol use, begun under President Bush. Specifically, the Food and Drug Administration has taken steps to stop the sale of cigarettes and smokeless tobacco to minors and prevent tobacco companies from targeting children with their advertisements and the Substance Abuse and Mental Health Services Administration has promulgated regulations to implement the Public Health Service Act requirement that each state enact and enforce laws banning the sale and distribution of tobacco products to people under 18.

The science calls for this approach. The inclusion of alcohol and tobacco is consistent with the growing body of research on effective prevention programs. The science-based, public health approach of the strategy requires:

- a focus on all forms of drug use, including underage alcohol and tobacco use.
- the application of all appropriate public health measures, including vigorous law enforcement to reduce trafficking, legal controls to reduce supply, education, anti-drug advertisements, early intervention and treatment.

Alcohol and tobacco are gateway drugs. While dangerous in their own right, alcohol and tobacco offer a gateway to and training ground for progression to other, even more dangerous drugs of abuse. Therefore, preventing or delaying tobacco and alcohol use prevents or delays the use of other drugs as well.

There is a strong statistical association between adolescents' use of tobacco, alcohol, and other drugs. Some researchers have documented a progression of drug use, which starts with alcohol and tobacco. For boys, alcohol use is the precursor to marijuana use and marijuana use is followed by the use of other illegal drugs. For girls, tobacco smoking along with alcohol use is the precursor to marijuana use.

The annual Monitoring the Future survey of 8th-, 10th-, and 12th-graders also establishes a strong association. In 1994, 8th-graders who smoked at all were 3 times more likely to try illicit drugs than nonsmokers. Pack-a-day smokers were 9 times more likely. For 10th-graders, the numbers were 3 times and 7.4 times, for 12th-graders 2.4 times and 5 times.



Smoking leads users from initial to regular use more quickly than do other means of administration. This is the case for tobacco, marijuana and methamphetamine. Tobacco smoking appears to be a training ground for the smoking of other drugs.

According to the National Institute on Drug Abuse, teens get hooked on tobacco by the time they are 12 to 14 years old. In 1995, 97 percent of 12th-graders who smoked a pack a day had begun smoking by the 4th grade.

In summary, while the use of alcohol and tobacco does not guarantee use of marijuana and other drugs, the use of marijuana and other drugs is exceedingly rare among those who have not used alcohol or tobacco first.

INFORMATION SHEET



Monitoring the Future Study

Trends in Lifetime Prevalence of Use of Various Drugs for Eighth, Tenth and Twelfth Graders
(Entries are percentages)

	Lifetime										
	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	'99-'00 change
Any Illicit Drug^a											
8 th Grade	18.7	20.6	22.5	25.7	28.5	31.2	29.4	29.0	28.3	26.8	-1.5
10 th Grade	30.6	29.8	32.8	37.4	40.9	45.4	47.3	44.9	46.2	45.6	-0.6
12 th Grade	44.1	40.7	42.9	45.6	48.4	50.8	54.3	54.1	54.7	54.0	-0.7
Any Illicit Drug Other Than Marijuana^a											
8 th Grade	14.3	15.6	16.8	17.5	18.8	19.2	17.7	16.9	16.3	15.8	-0.6
10 th Grade	19.1	19.2	20.9	21.7	24.3	25.5	25.0	23.6	24.0	23.1	-0.9
12 th Grade	26.9	25.1	26.7	27.6	28.1	28.5	30.0	29.4	29.4	29.0	-0.3
Any Illicit Drug Including Inhalants^{a,b}											
8 th Grade	28.5	29.6	32.3	35.1	38.1	39.4	38.1	37.8	37.2	35.1	-2.0
10 th Grade	36.1	36.2	38.7	42.7	45.9	49.8	50.9	49.3	49.9	49.3	-0.6
12 th Grade	47.6	44.4	46.6	49.1	51.5	53.5	56.3	56.1	56.3	57.0	+0.8
Marijuana/Hashish											
8 th Grade	10.2	11.2	12.6	16.7	19.9	23.1	22.6	22.2	22.0	20.3	-1.8
10 th Grade	23.4	21.4	24.4	30.4	34.1	39.8	42.3	39.6	40.9	40.3	-0.7
12 th Grade	36.7	32.6	35.3	38.2	41.7	44.9	49.6	49.1	49.7	48.8	-0.9
Inhalants^{b,c}											
8 th Grade	17.6	17.4	19.4	19.9	21.6	21.2	21.0	20.5	19.7	17.9	-1.8s
10 th Grade	15.7	16.6	17.5	18.0	19.0	19.3	18.3	18.3	17.0	16.6	-0.4
12 th Grade	17.6	16.6	17.4	17.7	17.4	16.6	16.1	15.2	15.4	14.2	-1.2
Nitrites^d											
8 th Grade	—	—	—	—	—	—	—	—	—	—	—
10 th Grade	—	—	—	—	—	—	—	—	—	—	—
12 th Grade	1.6	1.5	1.4	1.7	1.5	1.8	2.0	2.7	1.7	0.8	-0.8
Hallucinogens^c											
8 th Grade	3.2	3.8	3.9	4.3	5.2	5.9	5.4	4.9	4.8	4.6	-0.1
10 th Grade	6.1	6.4	6.8	8.1	9.3	10.5	10.5	9.8	9.7	8.9	-0.8
12 th Grade	9.6	9.2	10.9	11.4	12.7	14.0	15.1	14.1	13.7	13.0	-0.7
LSD											
8 th Grade	2.7	3.2	3.5	3.7	4.4	5.1	4.7	4.1	4.1	3.9	-0.2
10 th Grade	5.6	5.8	6.2	7.2	8.4	9.4	9.5	8.5	8.5	7.6	-1.0
12 th Grade	8.8	8.6	10.3	10.5	11.7	12.6	13.6	12.6	12.2	11.1	-1.1

INFO SHEET



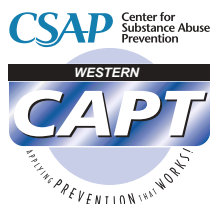
	Lifetime										
	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	'99-'00 change
Hallucinogens											
Other Than LSD											
8 th Grade	1.4	1.7	1.7	2.2	2.5	3.0	2.6	2.5	2.4	2.3	-0.1
10 th Grade	2.2	2.5	2.8	3.8	3.9	4.7	4.8	5.0	4.7	4.8	+0.1
12 th Grade	3.7	3.3	3.9	4.9	5.4	6.8	7.5	7.1	6.7	6.9	+0.2
PCP^d											
8 th Grade	—	—	—	—	—	—	—	—	—	—	—
10 th Grade	—	—	—	—	—	—	—	—	—	—	—
12 th Grade	2.9	2.4	2.9	2.8	2.7	4.0	3.9	3.9	3.4	3.4	-0.1
MDMA (Ecstasy)^d											
8 th Grade	—	—	—	—	—	3.4	3.2	2.7	2.7	4.3	+1.6 ^{ss}
10 th Grade	—	—	—	—	—	5.6	5.7	5.1	6.0	7.3	+1.3
12 th Grade	—	—	—	—	—	6.1	6.9	5.8	8.0	11.0	+3.0 ^s
Cocaine											
8 th Grade	2.3	2.9	2.9	3.6	4.2	4.5	4.4	4.6	4.7	4.5	-0.2
10 th Grade	4.1	3.3	3.6	4.3	5.0	6.5	7.1	7.2	7.7	6.9	-0.9
12 th Grade	7.8	6.1	6.1	5.9	6.0	7.1	8.7	9.3	9.8	8.6	-1.2
Crack											
8 th Grade	1.3	1.6	1.7	2.4	2.7	2.9	2.7	3.2	3.1	3.1	0.0
10 th Grade	1.7	1.5	1.8	2.1	2.8	3.3	3.6	3.9	4.0	3.7	-0.3
12 th Grade	3.1	2.6	2.6	3.0	3.0	3.3	3.9	4.4	4.6	3.9	-0.7 ^s
Other Cocaine^e											
8 th Grade	2.0	2.4	2.4	3.0	3.4	3.8	3.5	3.7	3.8	3.5	-0.3
10 th Grade	3.8	3.0	3.3	3.8	4.4	5.5	6.1	6.4	6.8	6.0	-0.8
12 th Grade	7.0	5.3	5.4	5.2	5.1	6.4	8.2	8.4	8.8	7.7	-1.1
Heroin^f											
8 th Grade	1.2	1.4	1.4	2.0	2.3	2.4	2.1	2.3	2.3	1.9	-0.4
10 th Grade	1.2	1.2	1.3	1.5	1.7	2.1	2.1	2.3	2.3	2.2	-0.1
12 th Grade	0.9	1.2	1.1	1.2	1.6	1.8	2.1	2.0	2.0	2.4	+0.4
With a needle^g											
8 th Grade	—	—	—	—	1.5	1.6	1.3	1.4	1.6	1.1	-0.5 ^{ss}
10 th Grade	—	—	—	—	1.0	1.1	1.1	1.2	1.3	1.0	-0.2
12 th Grade	—	—	—	—	0.7	0.8	0.9	0.8	0.9	0.8	-0.1
Without a needle^g											
8 th Grade	—	—	—	—	1.5	1.6	1.4	1.5	1.4	1.3	-0.1
10 th Grade	—	—	—	—	1.1	1.7	1.7	1.7	1.6	1.7	0.0
12 th Grade	—	—	—	—	1.4	1.7	2.1	1.6	1.8	2.4	+0.6

INFO SHEET



	Lifetime										
	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	'99-'00 change
Other Narcotics^h											
8 th Grade	—	—	—	—	—	—	—	—	—	—	—
10 th Grade	—	—	—	—	—	—	—	—	—	—	—
12 th Grade	6.6	6.1	6.4	6.6	7.2	8.2	9.7	9.8	10.2	10.6	+0.4
Amphetamines^h											
8 th Grade	10.5	10.8	11.8	12.3	13.1	13.5	12.3	11.3	10.7	9.9	-0.8
10 th Grade	13.2	13.1	14.9	15.1	17.4	17.7	17.0	16.0	15.7	15.7	+0.1
12 th Grade	15.4	13.9	15.1	15.7	15.3	15.3	16.5	16.4	16.3	15.6	-0.7
Methamphetamine^{i,j}											
8 th Grade	—	—	—	—	—	—	—	—	4.5	4.2	-0.3
10 th Grade	—	—	—	—	—	—	—	—	7.3	6.9	-0.5
12 th Grade	—	—	—	—	—	—	—	—	8.2	7.9	-0.3
Ice^j											
8 th Grade	—	—	—	—	—	—	—	—	—	—	—
10 th Grade	—	—	—	—	—	—	—	—	—	—	—
12 th Grade	3.3	2.9	3.1	3.4	3.9	4.4	4.4	5.3	4.8	4.0	-0.8
Barbiturates^h											
8 th Grade	—	—	—	—	—	—	—	—	—	—	—
10 th Grade	—	—	—	—	—	—	—	—	—	—	—
12 th Grade	6.2	5.5	6.3	7.0	7.4	7.6	8.1	8.7	8.9	9.2	+0.2
Tranquilizers^h											
8 th Grade	3.8	4.1	4.4	4.6	4.5	5.3	4.8	4.6	4.4	4.4	0.0
10 th Grade	5.8	5.9	5.7	5.4	6.0	7.1	7.3	7.8	7.9	8.0	+0.1
12 th Grade	7.2	6.0	6.4	6.6	7.1	7.2	7.8	8.5	9.3	8.9	-0.5
Rohypnol^{d,k}											
8 th Grade	—	—	—	—	—	1.5	1.1	1.4	1.3	1.0	-0.3
10 th Grade	—	—	—	—	—	1.5	1.7	2.0	1.8	1.3	-0.5
12 th Grade	—	—	—	—	—	1.2	1.8	3.0	2.0	1.5	-0.6

INFO SHEET



	Lifetime										
	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	'99-'00 change
Alcoholⁱ											
Any use											
8 th Grade	70.1	69.3	67.1	—	—	—	—	—	—	—	—
			55.7	55.8	54.5	55.3	53.8	52.5	52.1	51.7	-0.4
10 th Grade	83.8	82.3	80.8	—	—	—	—	—	—	—	—
			71.6	71.1	70.5	71.8	72.0	69.8	70.6	71.4	+0.9
12 th Grade	88.0	87.5	87.0	—	—	—	—	—	—	—	—
			80.0	80.4	80.7	79.2	81.7	81.4	80.0	80.3	+0.2
Been Drunk^k											
8 th Grade	26.7	26.8	26.4	25.9	25.3	26.8	25.2	24.8	24.8	25.1	+0.3
10 th Grade	50.0	47.7	47.9	47.2	46.9	48.5	49.4	46.7	48.9	49.3	+0.4
12 th Grade	65.4	63.4	62.5	62.9	63.2	61.8	64.2	62.4	62.3	62.3	0.0
Cigarettes											
Any use											
8 th Grade	44.0	45.2	45.3	46.1	46.4	49.2	47.3	45.7	44.1	40.5	-3.6 ^{sss}
10 th Grade	55.1	53.5	56.3	56.9	57.6	61.2	60.2	57.7	57.6	55.1	-2.5 ^s
12 th Grade	63.1	61.8	61.9	62.0	64.2	63.5	65.4	65.3	64.6	62.5	-2.1
Smokeless Tobacco^d											
8 th Grade	22.2	20.7	18.7	19.9	20.0	20.4	16.8	15.0	14.4	12.8	-1.6
10 th Grade	28.2	26.6	28.1	29.2	27.6	27.4	26.3	22.7	20.4	19.1	-1.3
12 th Grade	—	32.4	31.0	30.7	30.9	29.8	25.3	26.2	23.4	23.1	-0.4
Steroids^j											
8 th Grade	1.9	1.7	1.6	2.0	2.0	1.8	1.8	2.3	2.7	3.0	+0.3
10 th Grade	1.8	1.7	1.7	1.8	2.0	1.8	2.0	2.0	2.7	3.5	+0.8 ^{ss}
12 th Grade	2.1	2.1	2.0	2.4	2.3	1.9	2.4	2.7	2.9	2.5	-0.4

INFO SHEET

(Johnston, O'Malley, and Bachman, in preparation)
 (Office of National Drug Control Policy, 1999)
<http://monitoringthefuture.org/data/00data.html#2000data-drugs>